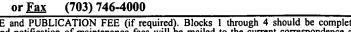
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Complete and send this form, together with applicable fee(s), to: Mail

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02/20/2004

Woodbridge & Associates, P.C. P.O. Box 592 Princeton, NJ 08542



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Roy Rosser		(Depositor's name)
Roy	Roner	(Signature)
3175	704	(Date)

FIRST NAMED INVENTOR CONFIRMATION NO. APPLICATION NO. FILING DATE ATTORNEY DOCKET NO. 2327-113US 9226 09/902,970 07/11/2001 Ruud Egas

TITLE OF INVENTION: SLEEVE WITH GUIDANCE RING

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APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE P	UBLICATION FEE	TOTAL F	EE(S) DUE	DATE DUE			
nonprovisional	YES	\$665		\$300	\$:	\$965		05/20/2004		
EXAMINER		ART UN	IT C	LASS-SUBCLASS						
RAEVIS, ROBERT R		2856	· · · · · · · · · · · · · · · · · · ·	073-864740						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Synnestvedt, Lechner & lwoodbridge, LLP 2Richard C. Woodbridge, and the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed.							
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